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CR MILES, P. CRAIG R. MILI 405 MASON CO	C. ES DURT, SUITE 119]	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. Shannon M. Kammerer (Depositor's name)				
FORT COLLING 3/02/2007 EAYALEUS		-[
1 FC:2501 700.00 0P				· (Signature)			
			February, 2B 2007		(Date)		
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	OR	ATTORNE	Y DOCKET NO.	CONFIRMATION NO.
10/089,224 03/27/2002 TITLE OF INVENTION: INTRANASAL DELIVERY SYSTEM			Steven J. Penner HESKA USNP 2477				2477
THE OF INVENTION	: IN I KANASAL DELIV	VERY SYSTEM					·
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DI	JE PREV. PAID ISSU	E FEE TO	OTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$0 		\$700	05/07/2007
EXAMINER ART UNIT		ART UNIT	CLASS-SUBCLASS				
MENDEZ, MANUEL A 3763			604-048000		-		
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							ocument has been filed for
Heska Corporation Loveland, Colorado							
Please check the appropr	iate assignee category or	categories (will not be pr		•		r other private gro	oup entity Government
4a. The following fee(s) ☑ Issue Fee ☐ Publication Fee (N		b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).					
	s SMALL ENTITY state	ıs. See 37 CFR 1.27.	☐ b. Applicant is no	longer claiming SMA	LL ENTITY	status. See 37 C	FR 1.27(g)(2).
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if requestroyed State	uited) will not be accepted	d from anyone other the Office.	an the applicant; à reg	istered attorr	ney or agent; or th	ne assignee or other party in
Authorized Signature	Laig	Ville		Date Fe	bruary	y 28 ,	2007
Typed or printed nam		Registration No. 45,954					
This collection of inform an application. Confiden submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 223	nation is required by 37 C tiality is governed by 35 d application form to the ions for reducing this bu lirginia 22313-1450. DC 113-1450.	CFR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the ONOT SEND FEES OR (on is required to obtain 1.14. This collection is depending upon the ire collection Of COMPLETED FORMS	or retain a benefit by estimated to take 12 dividual case. Any conficer, U.S. Patent and TO THIS ADDRESS	the public will minutes to comments on Trademark S. SEND TO	hich is to file (and omplete, includin the amount of ti Office, U.S. Depo Commissioner	I by the USPTO to process) g gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,

PART B - FEE(S) TRANSMITTAL

PTOL-85 (Rev. 07/06) Approved for use through 04/30/2007.

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EXPRESS MAIL LABEL NO.: EV 923014395 US

UNITED STATES PATENT AND TRADEMARK OFFICE

Title:

Intranasal Delivery System

Applicant:

Steven J. Penner and Randal W. Sebring

Application Number:

10/089,224

Filing Date:

March 27, 2002

Group Art Unit:

3763

Examiner Name:

Manuel Mendez

Attorney Docket Number:

HeskaUSNP

Assignee:

Heska Corporation

CERTIFICATE OF EXPRESS MAILING

- I, Shannon M. Kammerer, hereby certify to the truth of the following items:
- 1. I am an employee of CR MILES P.C., 405 Mason Court, Suite 119, Fort Collins, CO 80524.
- 2. I have this day deposited the attached A Part B Fee(s) Transmittal form PTOL-85 (page(s)) with a firm check payable to the Commissioner of Patent and Trademarks in the amount of \$700.00 as well as a PTO-2038 (page(s)) in the case of any deficient fees due for the issue fee on the above-identified application with the United States Postal Service as "Express Mail" for mailing to:

Mail Stop Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dated this 24 day of February, 2007

hannon M. Kammerer